



CCHHS Board of Directors Board Quality Dashboard

24 April 2015

Krishna Das, MD, Chief Quality Officer

Board Quality Dashboard

CCHHS QPS Committee Dashboard		CCHHS Board Metrics - Quality														TARGET	VARIANCE
Data as of 04/02/2015																	
PERFORMANCE MEASURES		CY 2014												CY 2015			
		Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb				
Stroger																	
Core Measures		Monthly Composite															
Venous Thromboembolism (VTE) (%)		79	73	86	81	92	85	88	88	83	84	79	92	99%	-7%		
Efficiency - Operating Room		Monthly %															
On-Time Start (%)		40	47	38	48	38	41	32	35	45	35	30	47	80	-33%		
Safety		Total # of Events															
HAC: Pressure Ulcer Stages III & IV ¹		15	7	12	10	9	10	7	6	5	4	6	8				
HAC: Falls with Injury ²																	
HAI: CLABSI SIR ³																	
HAI: CAUTI SIR ⁴																	
Patient Experience																	
Overall Rating of Hospital (% top box)		63	62	60	61	69	66	65	66	73	61	56	63	85%	-22%		
Provident																	
Core Measures																	
Venous Thromboembolism (VTE) (%)		87	52	62	84	54	64	84	54	64	84	93		99%	-6%		
Efficiency - Operating Room		Monthly %															
On-Time Start (%)		40	47	38	48	38	41	32	35	45	35	19	9	80%	-71%		
Patient Experience																	
Overall Rating of Hospital (% top box)		67	65	48	56	65	50	47	86	67	60	56	63	85%	-22%		
ACHN																	
Diabetes Control % with Hgb A1C < 9%		76	73		77		78		74	73	78%	-5%					
Patient Experience: Moving Through Visit		66	68		68		67		65	68	75%	-7%					
Patient Experience: Telephone Access		63	60		63		62		70	53	75%	-22%					
LEGEND		FOOTNOTES															
HAC: Hospital Acquired Conditions		¹ Adult discharges (≥ 18) with LOS ≥ 5 days; per 1000															
HAI: Hospital Acquired Infections		² All med/surg units and ICUs/CCUs; per 1000 patient-days															
infections		³ Eligible units include all units with laboratory confirmed event.															
CAUTI: Catheter-associated urinary tract infections		⁴ Eligible units include all units with confirmed event.															



CountyCare Metrics

Prepared for: CCHHS Board of Directors

STEVEN GLASS, EXECUTIVE DIRECTOR,
MANAGED CARE

APRIL 24, 2015

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Membership

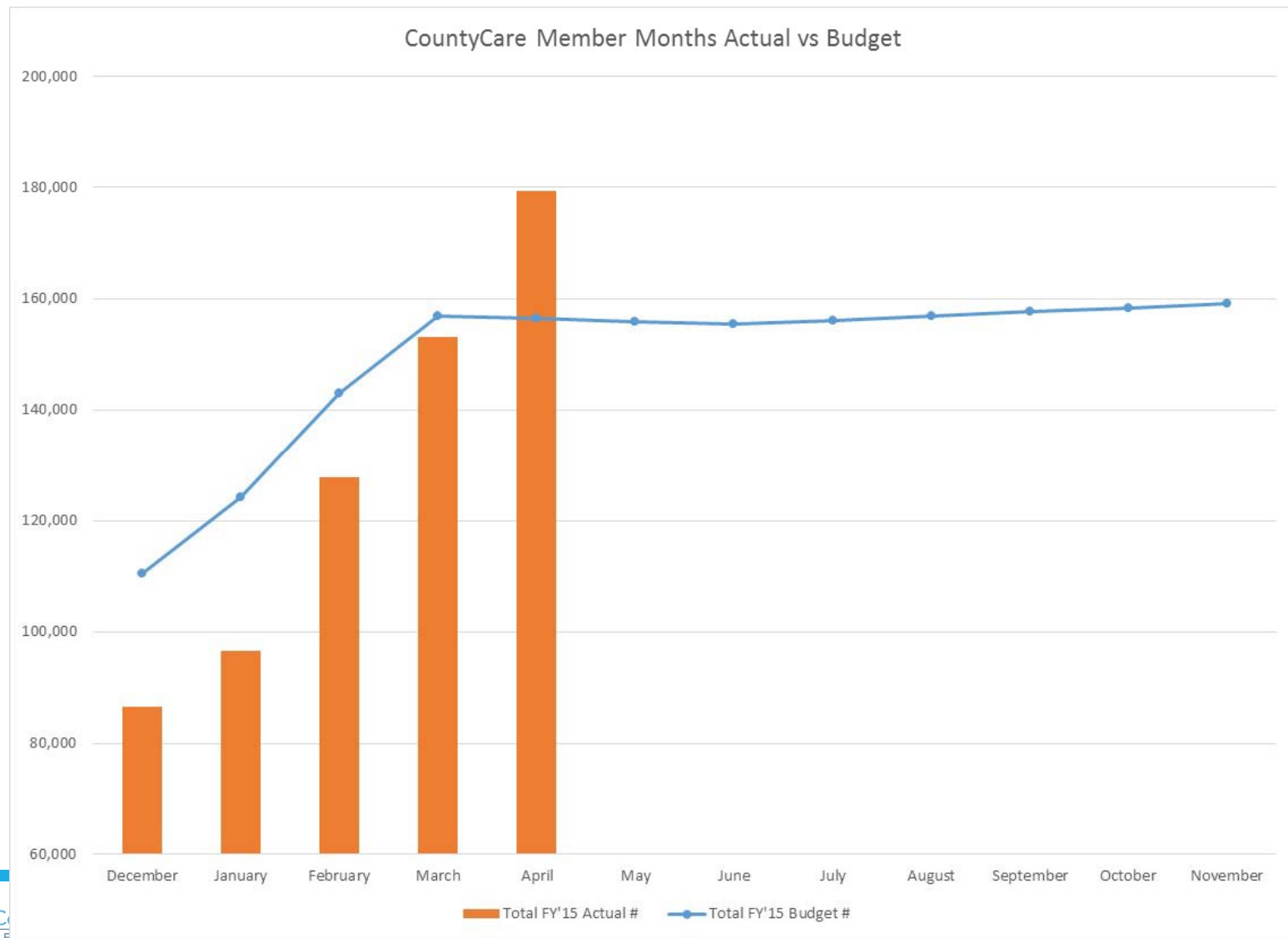
Data as of: 4/1/2015 | Source: Daily Membership (834) File

Key Measures	Jan'15	Feb'15	Mar'15	Apr'15	Change From Prior Month	Trend	FYTD'15 Budget or Goal	% to Budget/ Goal
Monthly Membership	96,618	127,799	153,118	179,393	17.2%	↑	156,396	114.7%
ACA	77,292	81,033	85,984	92,270	7.3%	↑	77,619	118.9%
FHP	17,569	44,919	64,494	84,324	30.7%	↑	74,506	113.2%
SPD	1,757	1,847	2,640	2,799	6.0%	↑	4,271	65.5%
Home/Community Waiver (incl DD)	402	421	474	500	5.5%	↑		
LTC	102	129	156	161	3.2%	↓		
FYTD Member Months	183,180	310,979	464,097	643,490			691,300	93.1%
ACA	156,206	237,239	323,223	415,493			412,871	100.6%
FHP	23,680	68,599	133,093	217,417			259,012	83.9%
SPD	3,294	5,141	7,781	10,580			19,417	54.5%

Gender = 56% Female; 44% Male

Average age = Female: 32 y/o; Male: 31 y/o

Membership Trend to Budget



Health Plan Comparison

Source: IL HFS, Greater Chicago Region

FHP/ACA Adults, Greater Chicago Region

Health Plan	Oct'14 #	Nov'14 #	Dec'14 #	Jan'15 #	Feb'15 # % Total		# Change Month Prior	% Change Month Prior
Family Health Network	89,964	107,840	151,195	207,969	213,537	19.1%	5,568	2.7%
CountyCare	88,858	85,453	83,733	93,245	123,920	11.1%	30,675	32.9%
Harmony Health Plan	111,073	111,300	123,966	138,336	120,630	10.8%	(17,706)	-12.8%
Blue Cross Blue Shield	1,482	7,977	43,575	78,639	112,352	10.1%	33,713	42.9%
IlliniCare Health Plan	1,578	10,520	31,944	76,603	102,208	9.1%	25,605	33.4%
Meridian Health Plan	3,633	14,195	33,848	66,773	87,161	7.8%	20,388	30.5%
Aetna Better Health Inc.	523	9,875	22,848	52,375	77,676	7.0%	25,301	48.3%
Advocate Accountable Care (ACE)	7,597	13,812	34,495	68,865	75,948	6.8%	7,083	10.3%
SmartPlan Choice (ACE)	32	2,007	17,661	44,374	60,162	5.4%	15,788	35.6%
Community Care Partners (ACE)	22	302	9,700	33,805	37,195	3.3%	3,390	10.0%
MyCare Chicago (ACE)	478	1,598	1,937	9,066	30,628	2.7%	21,562	237.8%
Loyola Family Care (ACE)	150	1,665	3,390	17,030	22,060	2.0%	5,030	29.5%
HealthCura (ACE)	28	181	14,318	21,807	20,908	1.9%	(899)	-4.1%
UI Health Plus (ACE)	4	39	609	2,691	12,926	1.2%	10,235	380.3%
Better Health Network (ACE)	11	155	976	9,451	11,860	1.1%	2,409	25.5%
Illinois Partnership for Health (ACE)	298	2,160	3,731	3,564	3,676	0.3%	112	3.1%
Next Level (CCE serving ACA only)	41	263	434	1,590	2,174	0.2%	584	36.7%
Lurie Children's Health Partners (CSN CCE)	92	414	801	1,485	1,596	0.1%	111	7.5%
LaRabida Coordinated Care Network (CSN CCE)	4	34	92	583	595	0.1%	12	2.1%
Total	305,868	369,790	579,253	928,251	1,117,212		188,961	20.4%

Health Plan Comparison

Source: IL HFS, Chicago Region (includes suburban Cook & Collar Counties)

ICP Greater Chicago Region (SPD population)

Health Plan	Oct'14	Nov'14	Dec'14	Jan'15	Feb'15		# Change	% Change
	#	#	#	#	#	% Total	Month Prior	Month Prior
Aetna Better Health Inc.	28,547	29,377	29,180	29,276	29,130	2.6%	(146)	-0.5%
IlliniCare Health Plan Inc.	28,018	28,422	28,067	28,058	27,785	2.5%	(273)	-1.0%
Community Care Alliance of Illinois	6,954	7,726	7,766	7,804	7,793	0.7%	(11)	-0.1%
Blue Cross/Blue Shield of Illinois	4,610	5,422	5,597	5,803	5,998	0.5%	195	3.4%
Humana Health Plan	3,679	4,162	4,603	4,602	4,542	0.4%	(60)	-1.3%
Meridian Health Plan	4,164	4,059	4,188	4,332	4,332	0.4%	-	0.0%
Cigna HealthSpring of Illinois	3,193	4,143	4,142	4,337	4,300	0.4%	(37)	-0.9%
Next Level (CCE)	3,987	4,616	3,826	3,666	3,516	0.3%	(150)	-4.1%
CountyCare	352	1,169	1,535	1,764	2,586	0.2%	822	46.6%
EntireCare (CCE)	2,169	2,211	2,179	2,588	2,584	0.2%	(4)	-0.2%
Together4Health (CCE)	1,521	1,530	1,582	2,236	2,309	0.2%	73	3.3%
Be Well (CCE)	1,450	1,396	1,374	1,387	1,380	0.1%	(7)	-0.5%
Total	88,644	94,233	94,039	95,853	96,255		402	0.4%

Risk Management

Key Measures	Jan'15	Feb'15	Mar'15	Change From Prior Month	Trend	FYTD'15 Budget or Goal	% to Budget/ Goal Shift from 3/2014
<u>ACA Adult Membership</u>							
% 19-24 y/o	16.2%	16.3%	16.2%	-0.2%	--	17.0%	-0.8%
% 25-34 y/o	15.5%	16.0%	16.0%	0.0%	--	14.8%	1.2%
% 35-44 y/o	13.3%	13.4%	13.4%	0.0%	--	13.5%	-0.1%
% 45-54 y/o	26.2%	26.0%	25.8%	-0.2%	--	27.6%	-1.8%
% 55+ y/o	28.9%	29.0%	28.6%	-0.4%	--	27.0%	1.6%
<u>Pharmacy</u>							
# Scripts filled	134,787	136,708	179,367	42,659	↑		
% Utilizing Members	37%	31%	32%	1.1%	↑		
# Scripts/Utilizer	3.75	3.44	3.60	0.16	--		
% Generic dispensing	84%	83%	83%	0%	--		
% Brand Single Source	16%	16%	16%	0%	--		
% Formulary	98%	98%	98%	0%	--	98%	0.0%
% CCHHS HIV pt meds @ CCHHS pharmacy	25.1%	29.8%	33.1%	3.3%	↑	80%	-46.9%
% Maintenance Rx on Extended Supply (>84 days)	13.1%	13.1%	15.1%	2.0%	↑	85%	-69.9%

Care Management

Key Measures	Jan'15	Feb'15	Mar'15	Change From Prior Month	Trend	FYTD'15 Budget or Goal	% to Budget/ Goal
<u>PCMH Assignment</u>							
% Members Assigned to PCMH	99.1%	99.9%	98.5%	-1.4%	↓	124,318	0.0%
% Members Unassigned	0.9%	0.1%	1.5%	1.4%	↓		
# Assigned CCHHS/ACHN	27,902	29,810	33,986	4,176	↑		
% Total Members @ CCHHS/ACHN	28.9%	23.3%	22.2%	-1.1%	↓		
# Assigned MHN ACO	29,570	48,148	59,852	11,704	↑		
% Total Members @ MHN ACO	30.6%	37.7%	39.1%	1.4%	↑		
<u>Member Risk Stratification</u>							
Total Outreached Members YTD	30,776	54,894	73,402	18,508	↑		
Health Risk Assessments/Screenings YTD	18,312	19,242	26,829	7,587	↑		
YTD % High Risk Members	4.6%	3.1%	2.5%	-0.6%	↓	2.0%	0.5%
<u>Referral Management</u>							
# Authorizations: Inpatient	1,557	1,355	1,677	322	↑		
# Authorizations: Outpatient	2,405	2,092	2,901	809	↑		
<u>Utilization Management (7/1-2/28/2015)</u>							
Admits/1,000 member months	169	171	Data Not Yet Available				
Days/1,000 member months	756	761					
ED Visits/1,000 member months	1,001	966					
% 30-day Readmissions	21%	22%				14.7%	7.30%
<u>CCHHS Utilization (since 7/1/2014)</u>							
Emergency Room	17.1%	16.5%	19.4%	2.9%	↑		
Hospital Inpatient	15.2%	14.4%	11.3%	-3.1%	↓		
Hospital Outpatient	25.3%	26.0%	24.3%	-1.7%	↓		
Other Medical	0.58%	0.60%	0.9%	0.3%	--		
Primary Care	38.7%	37.9%	34.5%	-3.4%	↓		
Specialist	7.6%	9.5%	10.6%	1.1%	↑		

Operations

Key Measures	Jan'15	Feb'15	Mar'15	Apr'15	Change From Prior Month	Trend	FYTD'15 Budget or Goal	% to Budget/ Goal Goal Met
<u>Call Center</u>								
Call Volume	23,240	25,825	29,950		4,125			
Abandonment rate	5.4%	2.6%	1.4%		-1.3%	↑	<4%	Y
Hold time	:01:07	:00:38	:00:23				< :01:00	Y
Average speed to answer	:00:34	:00:23	:00:13				< :00:45	Y
<u>Claims Processing</u>							# Days	Goal Met
# Claims Paid	54,194	64,463	93,786		29,323	↑		
# Claims Recv'd/DOS	78,783	77,544	120,558		43,014	↑		
	FY'14 Q4	FY'15 Q1	FYTD'15 Q2					
Avg # Days Received-to-Processed	4	4	3				< 8	Y
Avg # Days Received-to-Paid/Pend	28	27	8				< 35	Y

1115 Waiver Evaluation

Required under Waiver's special terms and conditions

Contracted by HFS to UIC

CCHHS worked closely with UIC evaluation team

- Data
- Program design
- Contacts



Evaluation Findings

Goal #1: Assist the State in enrolling an estimated 125,000 eligible uninsured Cook County residents in the Medicaid program during the original 12 month Waiver period.

Finding: **Enrolled 113,779 eligible individuals** in the Medicaid program under the new eligibility category (during the 12/2012-12/2013 Waiver period)

Evaluation Findings

Goal #2: Expand access to Medicaid covered services, with a focus on mental health, substance abuse and prescription drug services.

Findings: Expanded the CCHHS healthcare delivery capacity by negotiating network provider contracts with a **broad network of healthcare providers which expanded capacity** (during the 12/2012-12/2013 Waiver period)

- **141 FQHC sites; 17 CCHHS ambulatory clinic sites**
- **30 community hospitals, 2 teaching hospitals, 2 CCHHS hospitals**
- **100+ physician specialists**
- **Numerous other medical and allied health practitioners as well as dozens of local pharmacies**

Evaluation Findings

Goal #3: Provide access to primary care physicians and/or other primary care teams of professionals to establish medical homes by expanding the geographic and temporal access to Medicaid covered services.

Findings: **Provided medically necessary care to 68% of the CountyCare newly covered individuals in the first 6 months** of Waiver operation

Provided medically necessary care to 85% of the CountyCare newly covered individuals within the 12 months of Waiver operation

Expanded choice of a primary care medical home to include the existing CountyCare ambulatory clinic sites (17) as well as the 141 FQHC sites

Key Lessons Learned

Key Lessons Learned	Ways to Potentially Address in Large(r) Scale Initiatives
Medicaid eligibility determination and enrollment is a long process	Presumptive eligibility
Expanding the network of providers too quickly resulted in confusion with respect to referrals and intake across the provider network	Time staff training programs prior to any network referrals
PCP/PCMH assignment, while positive overall, created significant changes in practices for providers and the newly covered population.	Establish education and training for both healthcare professionals and CountyCare members.

Additional Evaluation Discussions

Organizational-level changes at CCHHS needed for CountyCare implementation

Transformation on service delivery within CCHHS and within network providers

Presentation of enrollment figures (gender, PCMH assignment, age group, zip, etc.)

‘HEDIS Measure Results for CountyCare’ 12/2012-12/2013

COOK COUNTY HEALTH & HOSPITALS SYSTEM HUMAN RESOURCES METRICS CCHHS BOARD OF DIRECTORS APRIL 24, 2015

Gladys Lopez, Chief of Human Resources

Barbara Pryor, Deputy Chief of Human Resources

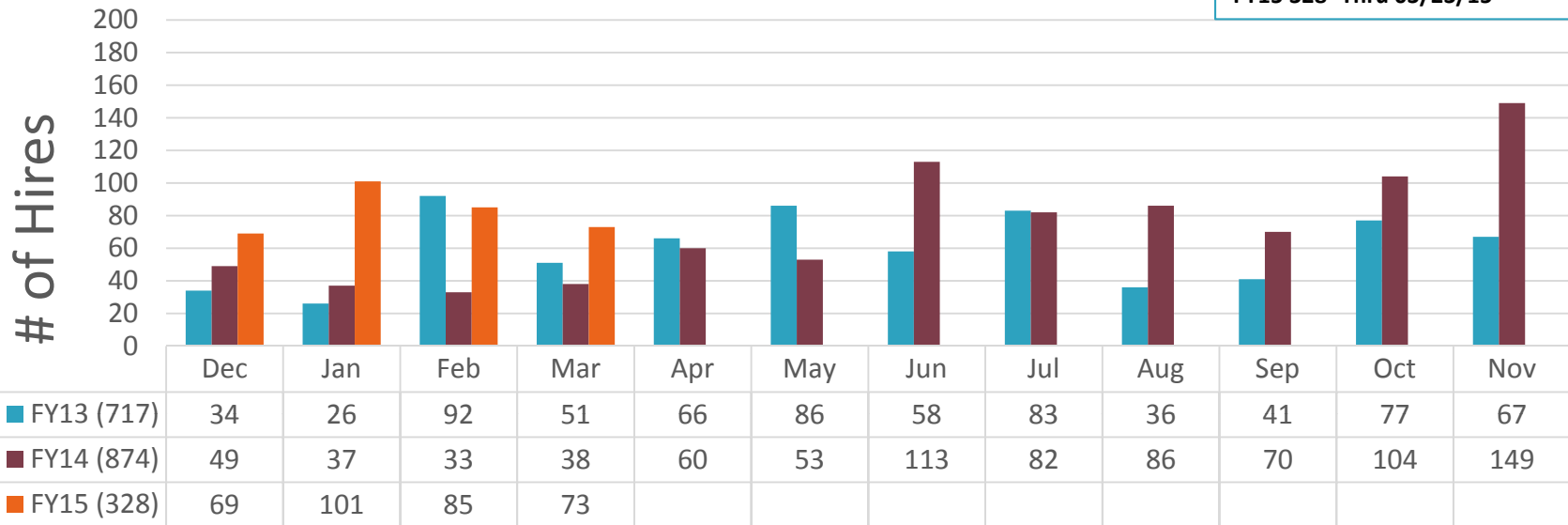


**COOK COUNTY HEALTH
& HOSPITALS SYSTEM**
CCHHS

Goal: Reduce CCHHS Vacancies to 600

VACANCIES FILLED

FY13 717
FY14 874 Increase by 22%
FY15 328 -Thru 03/23/15



Thru 03/23/15

FY15 Vacancies Filled by Job Function / Open Positions

YTD hires increased by 108%

Job Function	FY14 Hired	FY14 Year To Date Thru March 2014	FY15 Year To Date Thru March 2015	FY15 RTHs in Process (As of 3/27/15)
Finance	15	0	16	¹ 59
HIS	5	2	3	20
Licensed Practice Nurses	24	1	8	8
Nursing (CNI, CNII, APN, Nurse Coordinator, Clinician)	311	45	103	308
Physicians	97	34	24	88
Pharmacy	49	13	6	43
Other	373	62	168	304
Total	874	157	328	² 830

¹ Medicaid eligibility insourcing

² Fluctuate month to month based on hires and requisitions.

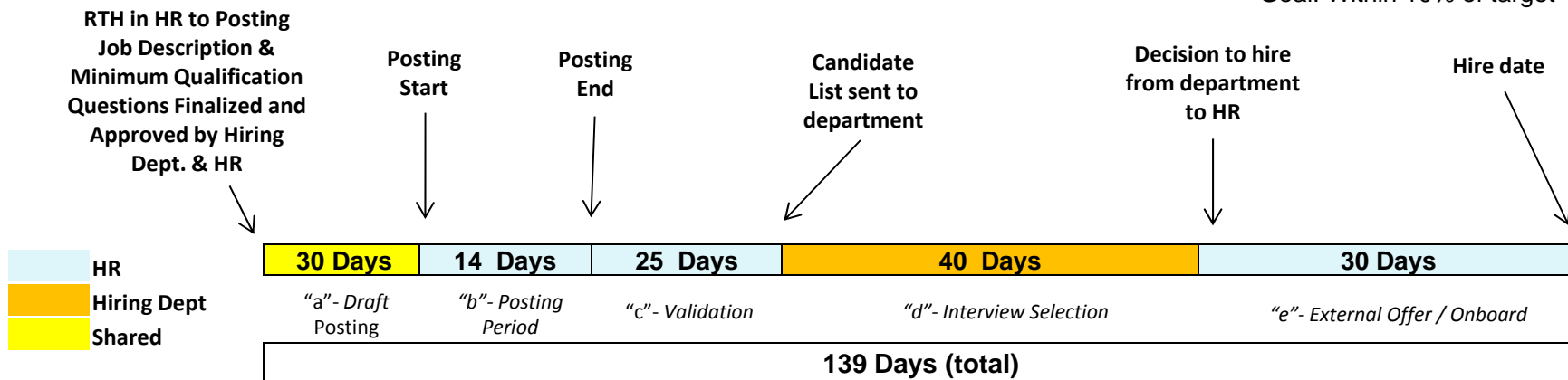


FY15 HR Goal: Improve / Reduce Average Time to Hire

Budget to Recruiting average of 30 Days

Goals	2014 Actual	2015 Target	Dec Actual	Jan Actual	Feb Actual	Mar Actual	Apr Actual	May Actual	June Actual	YTD Avg	STATUS
a Average # of days from Request to Hire approval to Posting Open Changed Target from 10 - 30	91	30	80	48	73	51				62	
b Average # of posting days	14	14	13	9	12	13				11	
c Average # of days from Posting Close to Interview Referral Changed Target from 15 - 25	28	25	33	22	27	30				27	
d Average # of days from Interview Referral to Decision to Hire to HR. (Interview/Selection) Changed Target from 25 - 40	29	40	29	23	32	28				28	
e Average # of days from decision to hire until actual Hire Date. <i>Credentialed Positions: Physicians, Psychologist, Physician Assistant I and Advanced Practice Nurses.</i>	41	30	55	49	51	52				51	
f Average # of days from Request to Hire to Hire Date Changed Target from 94 - 139	203	139	209	151	195	168				180	

Goal: Within 10% of target



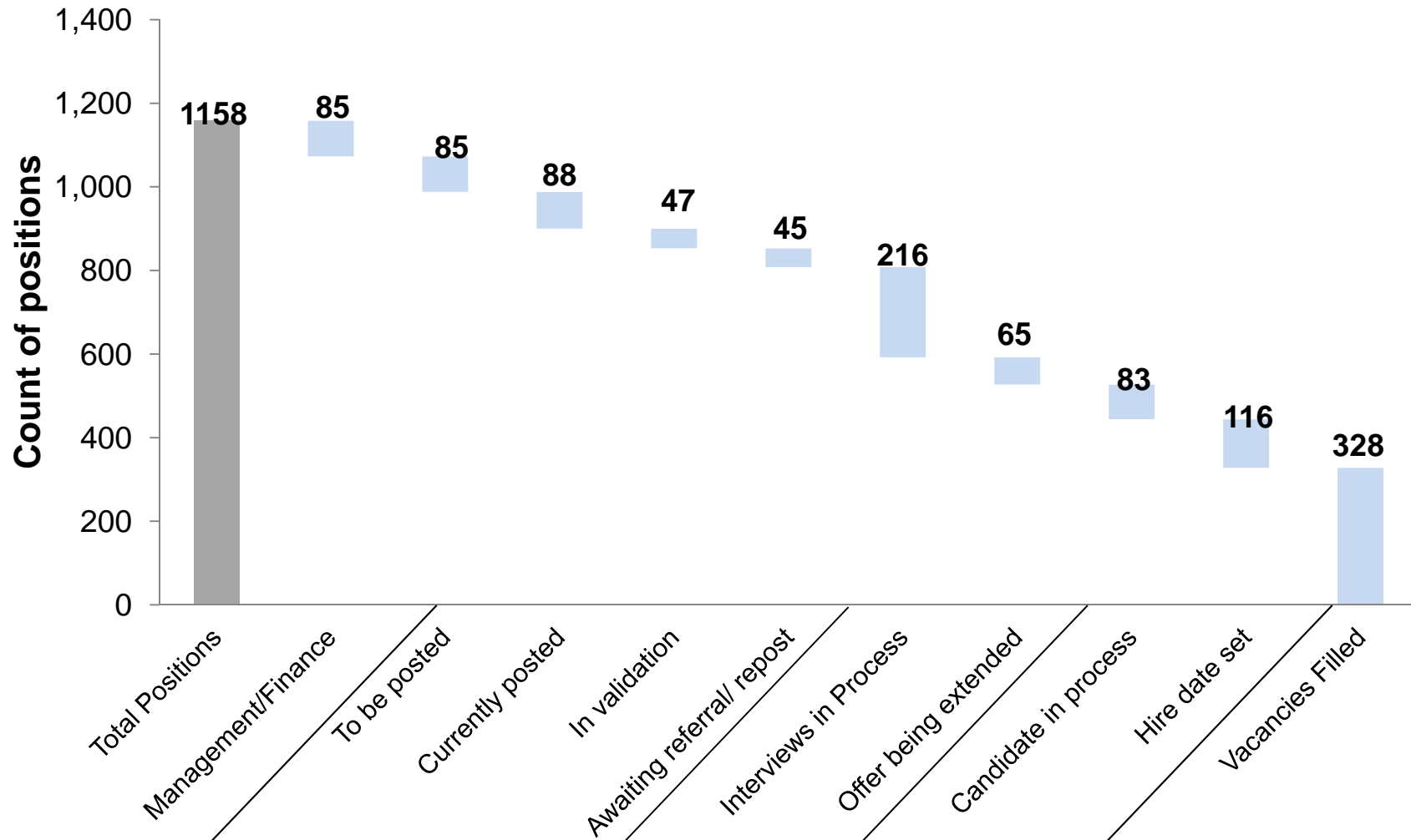
Benchmark: 58

Data source: TLNT The Business of HR

<http://www.tlnt.com/2014/08/14/employers-find-that-time-to-fill-job-rates-are-growing-hit-13-year-high/>

FY15 HR Goal: Improve / Reduce Average Time to Hire

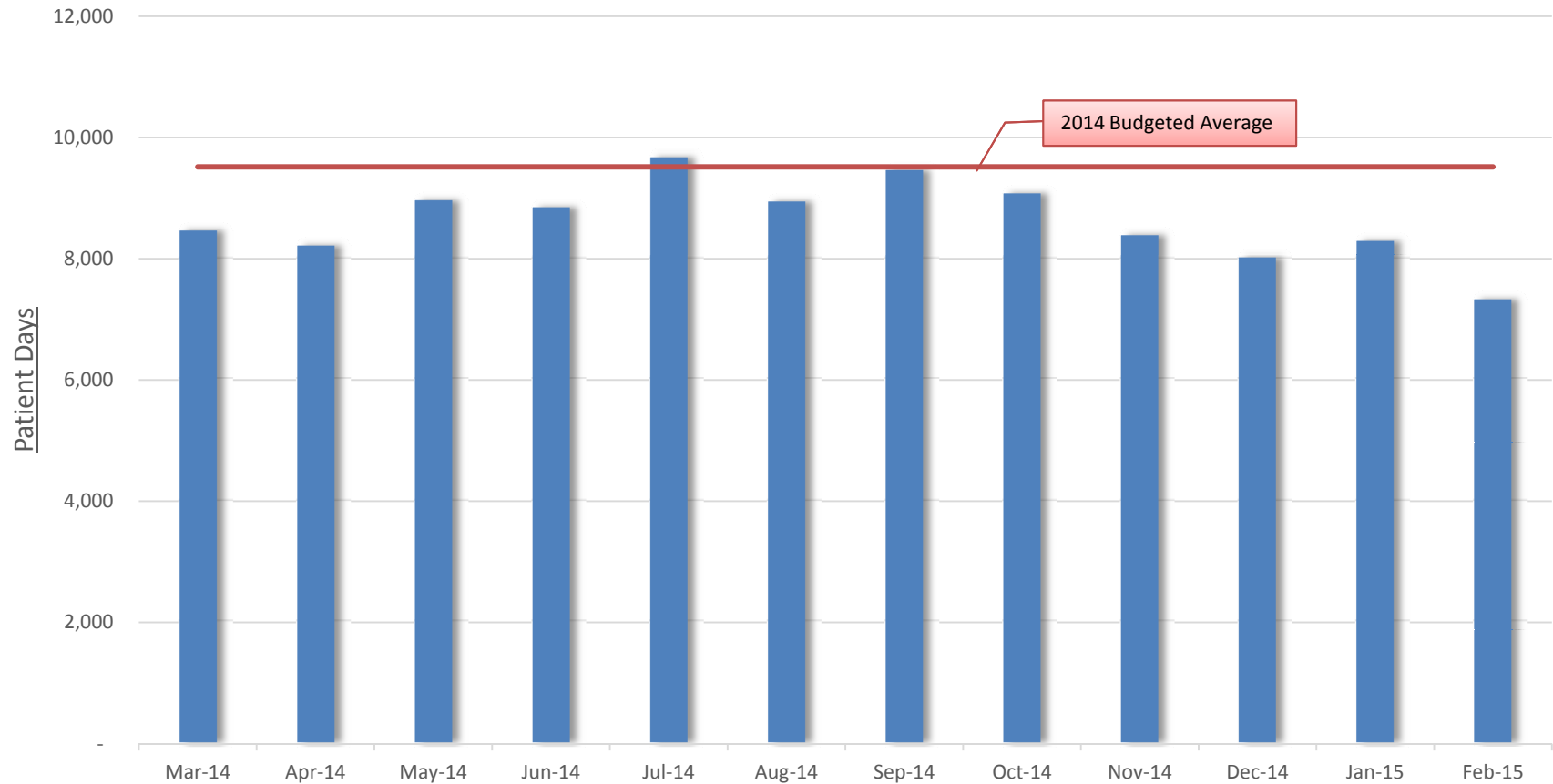
Hiring Snapshot (03/27/15)



Shared Responsibility	Human Resources	Management	Human Resources	Management Human Resources
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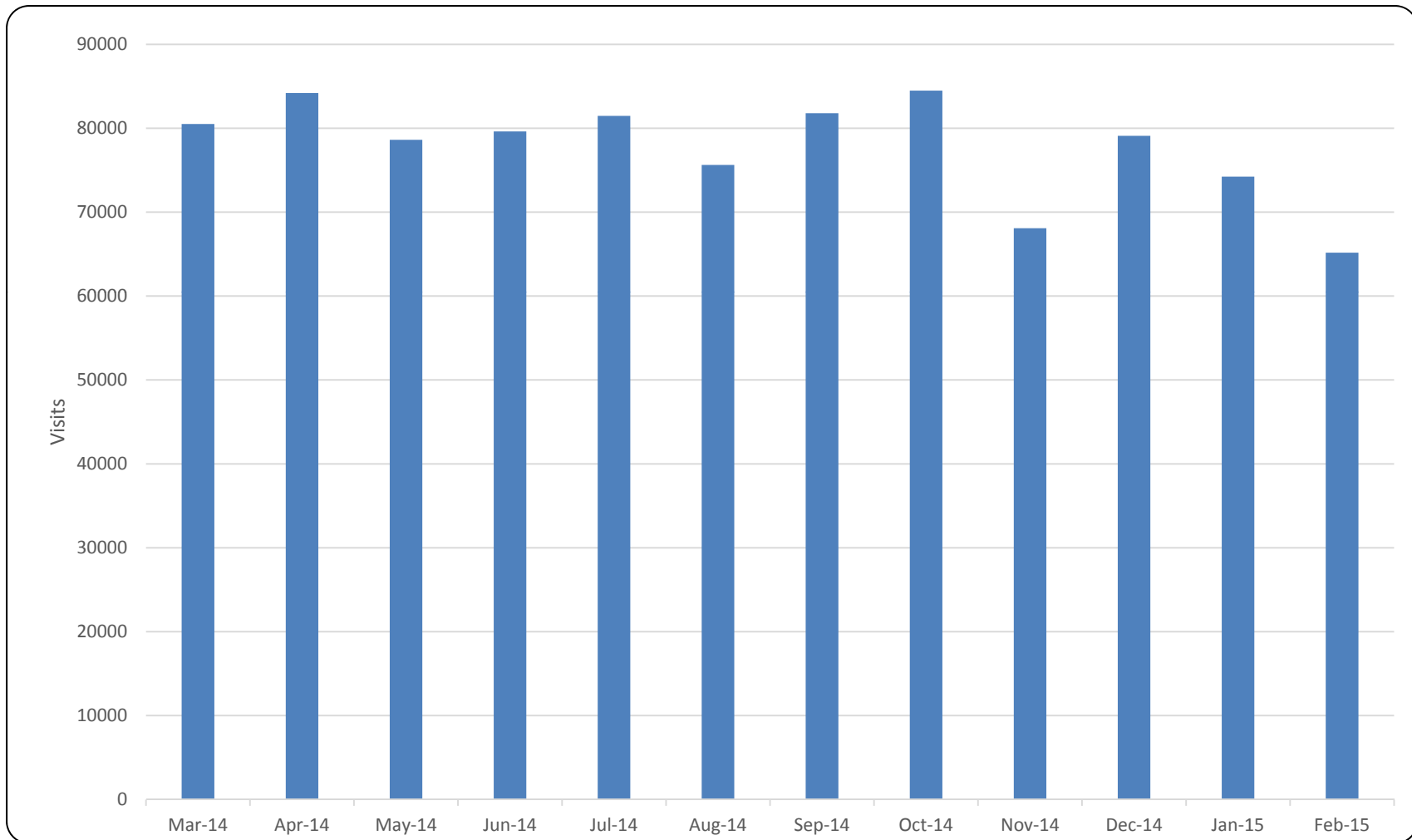
SNAPSHOT OF FY15 CCHHS RECRUITING PROGRESS

CCHHS: Monthly Inpatient Days (Stroger & Provident)



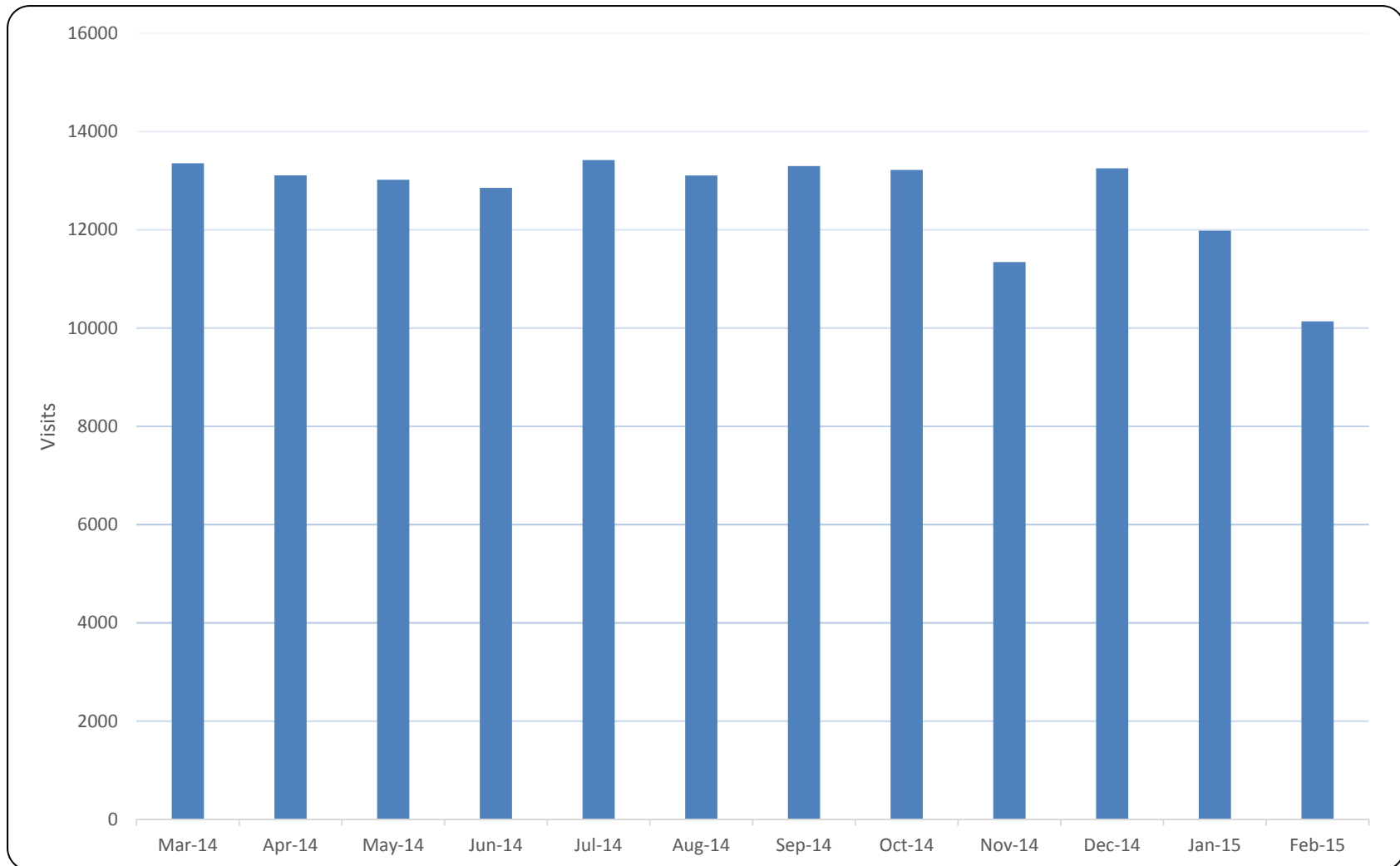
Source: CERNER

CCHHS: Monthly Outpatient Clinic Volume- all registrations



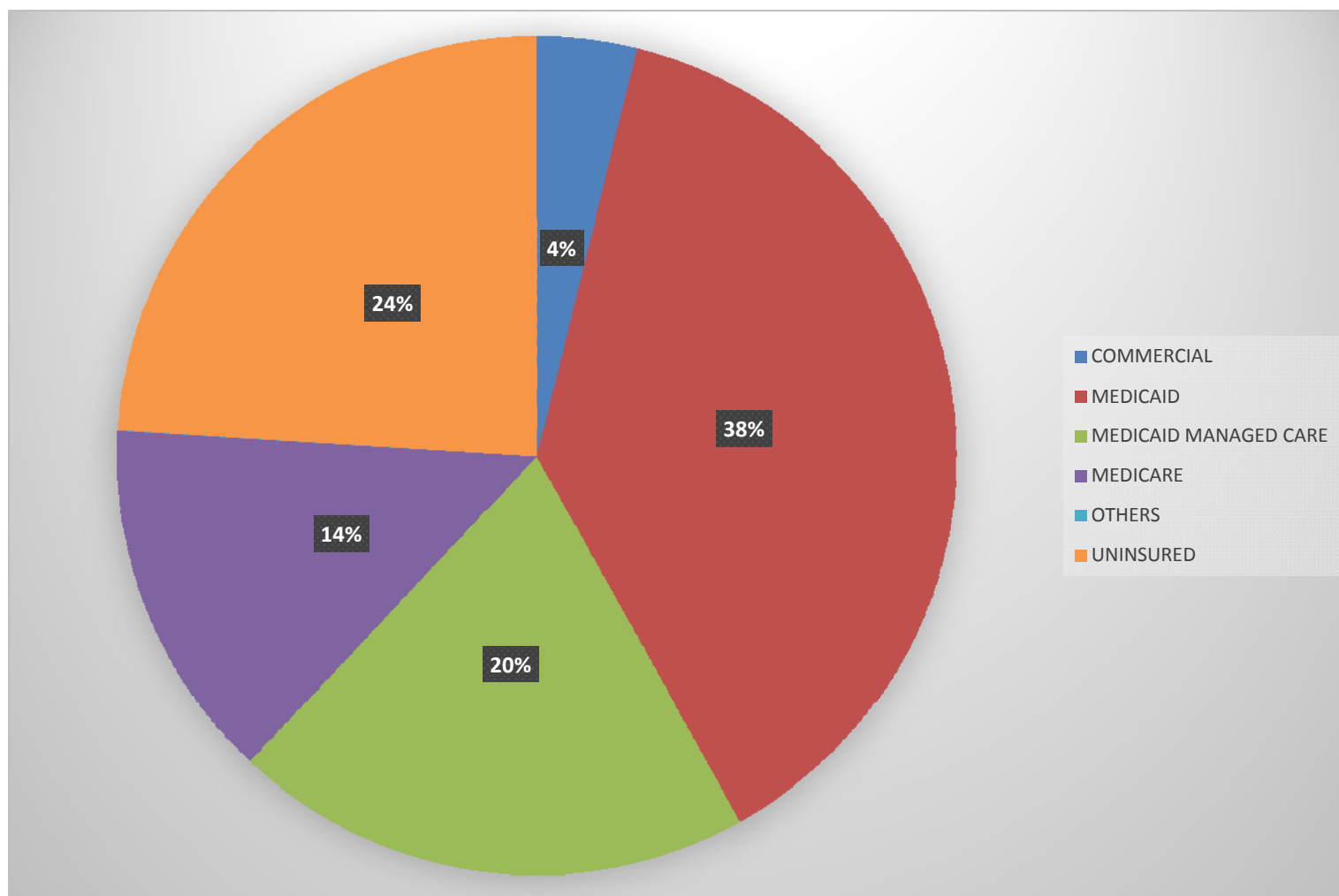
Source: CERNER

CCHHS: Monthly ED Volume (Stroger & Provident)



Source: CERNER

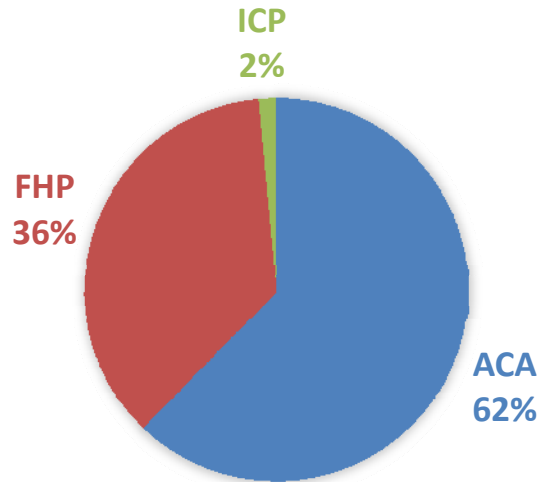
CCHHS: Inpatient Days by Payor Plan (Mar 14 – Feb 15)



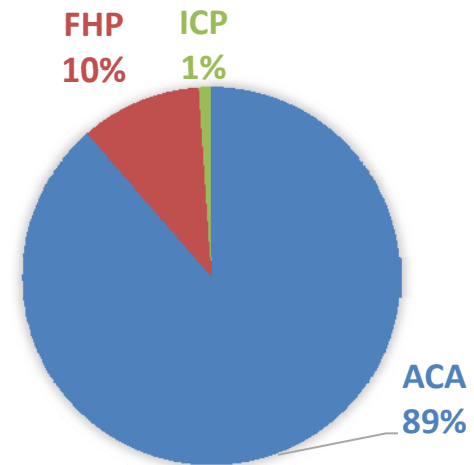
Source: Siemens

CountyCare: Snap Shots (July 14 – Feb 15)

Current Population by Membership Type



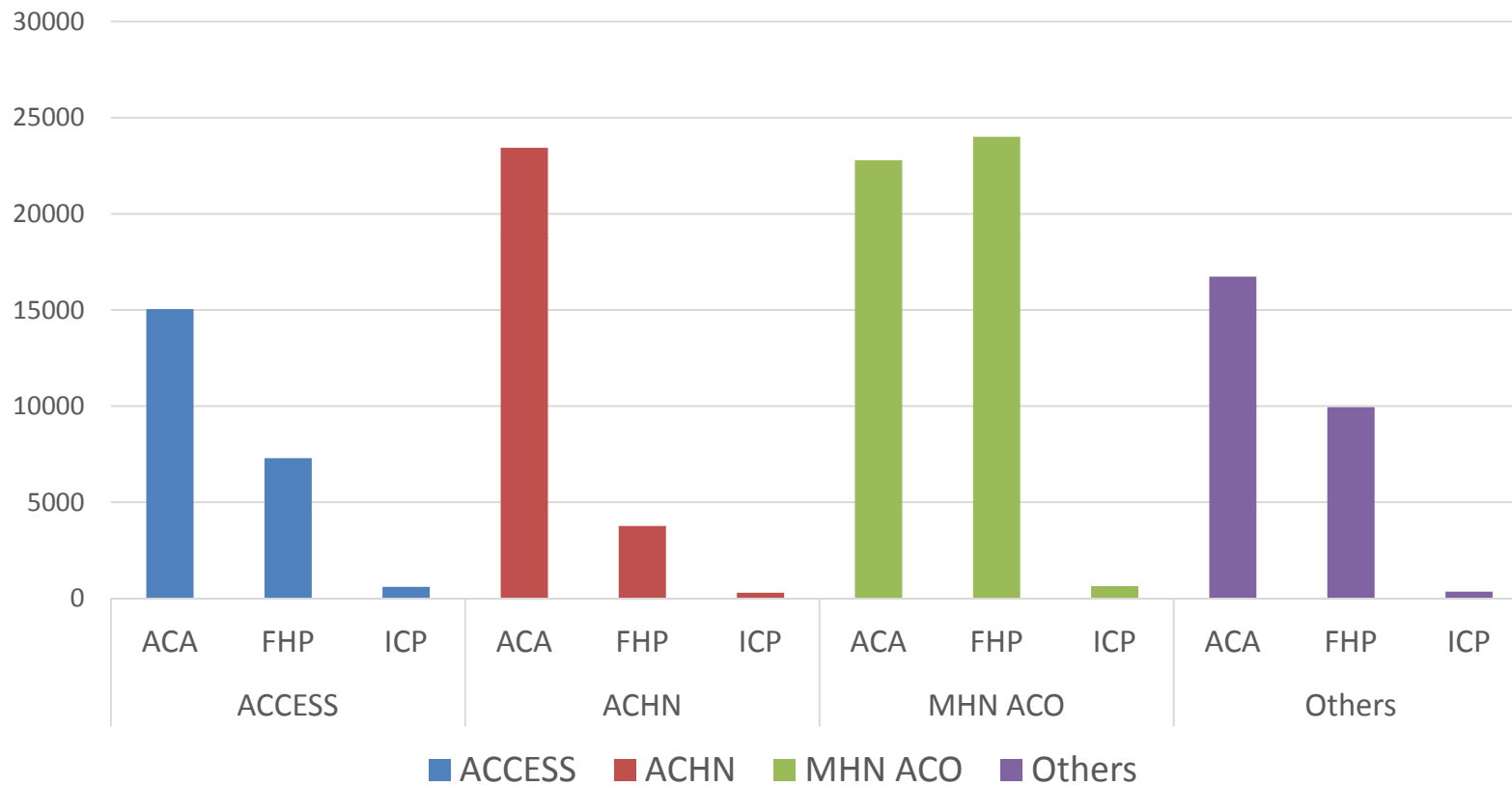
Cumulative Member Months by Membership Type



Source: CountyCare

CountyCare: Snap Shots Feb 15

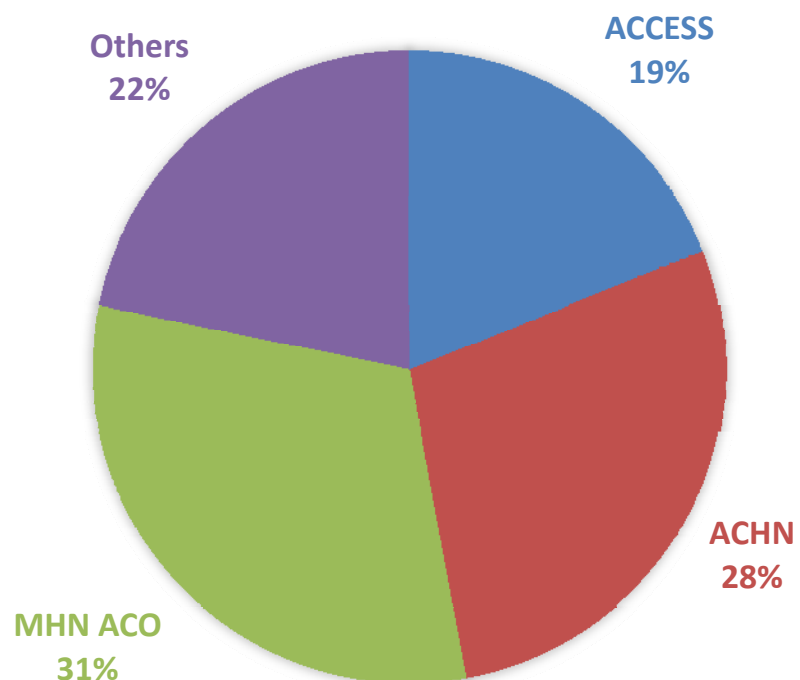
Empanelment by Population



Source: CountyCare

CountyCare: Snap Shots (July 14 – Feb 15)

Member Months by Empanelment

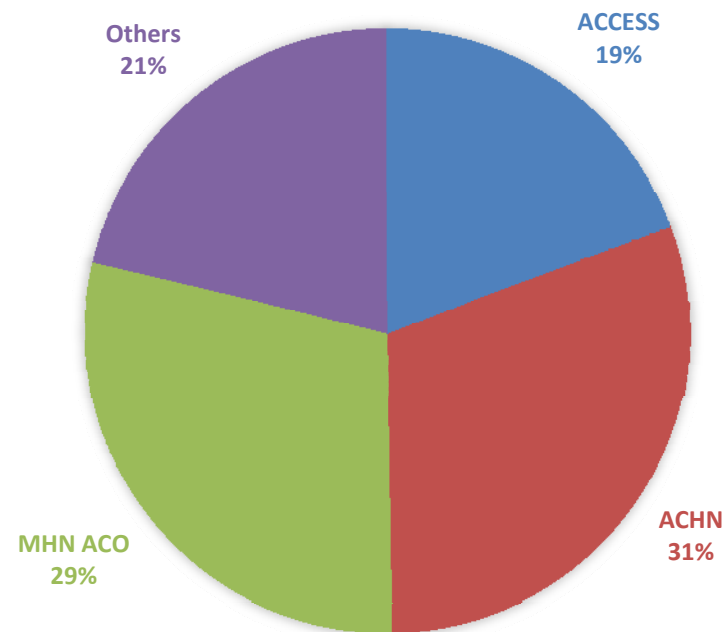


Source: CountyCare

*Others include La Rabida Childrens Hospital

CountyCare: Snap Shots (July 14 – Feb 15)

ACA Member Months by Empanelment

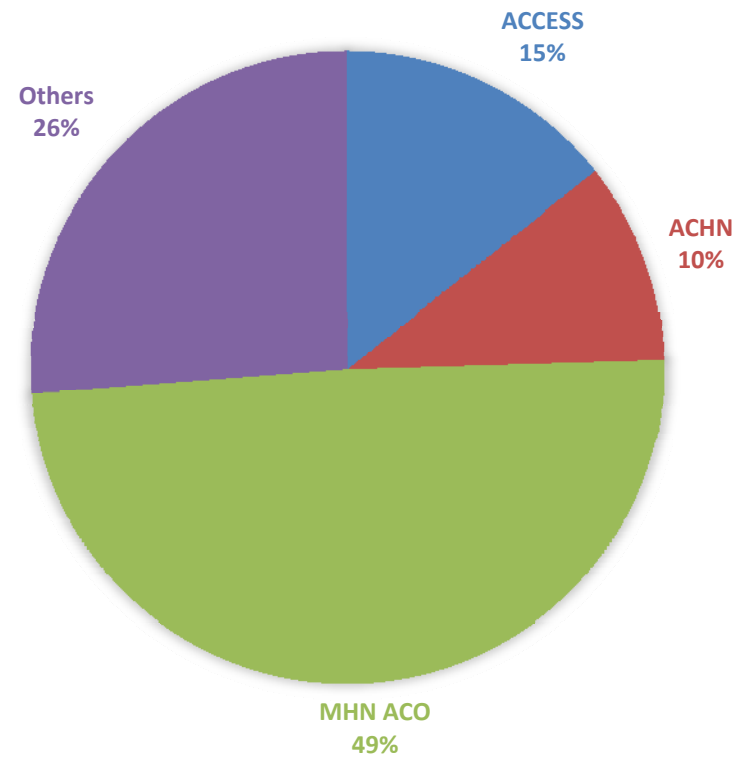


Source: CountyCare

*Others include La Rabida Childrens Hospital

CountyCare: Snap Shots (July 14 – Feb 15)

FHP Member Months by Empanelment

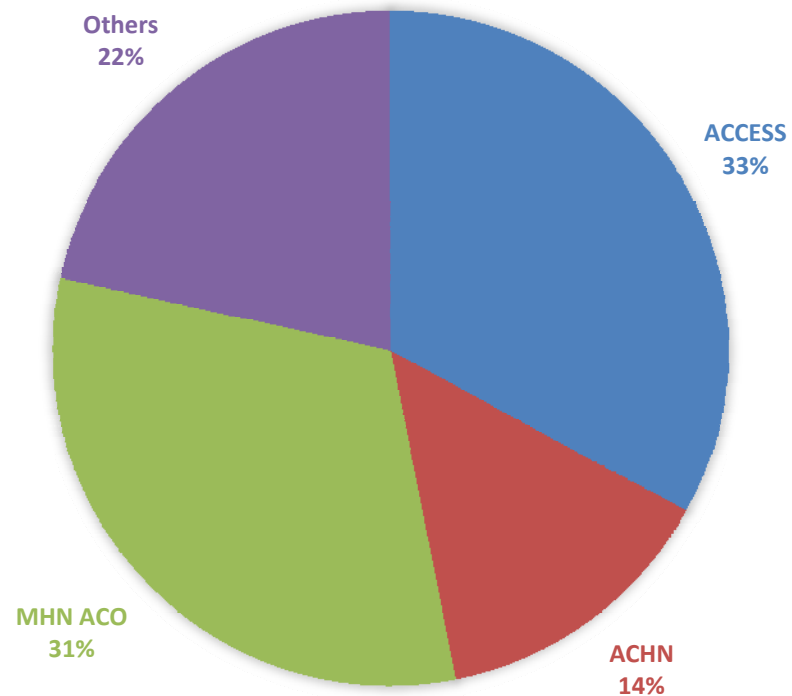


Source: CountyCare

*Others include La Rabida Childrens Hospital

CountyCare: Snap Shots (July 14 – Feb 15)

ICP Member Months by Empanelment

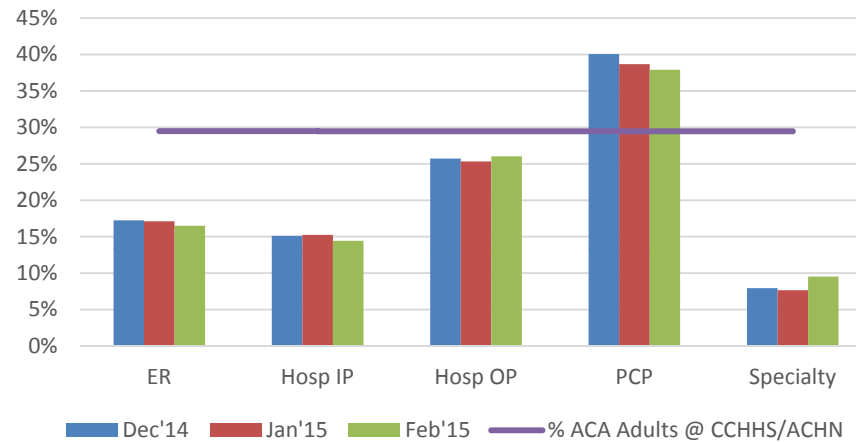


Source: CountyCare

*Others include La Rabida Childrens Hospital

CountyCare : CCHHS Service Utilization - Comparison

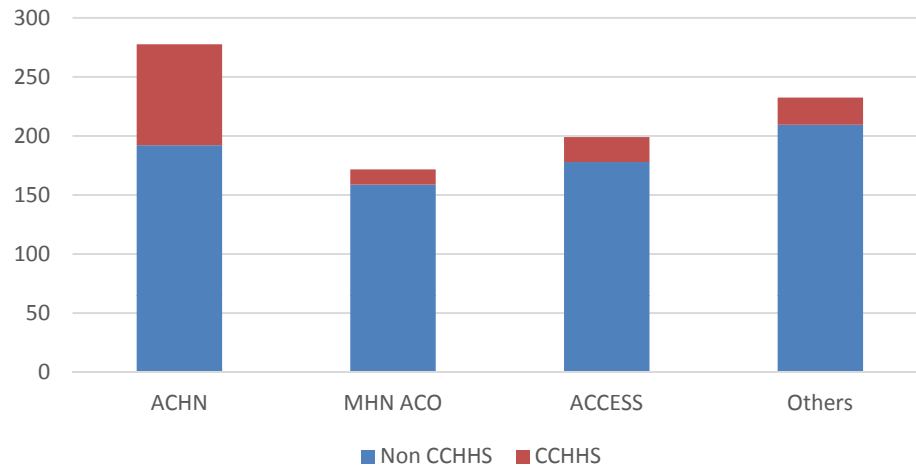
Percentage of Claims for Services at CCHHS



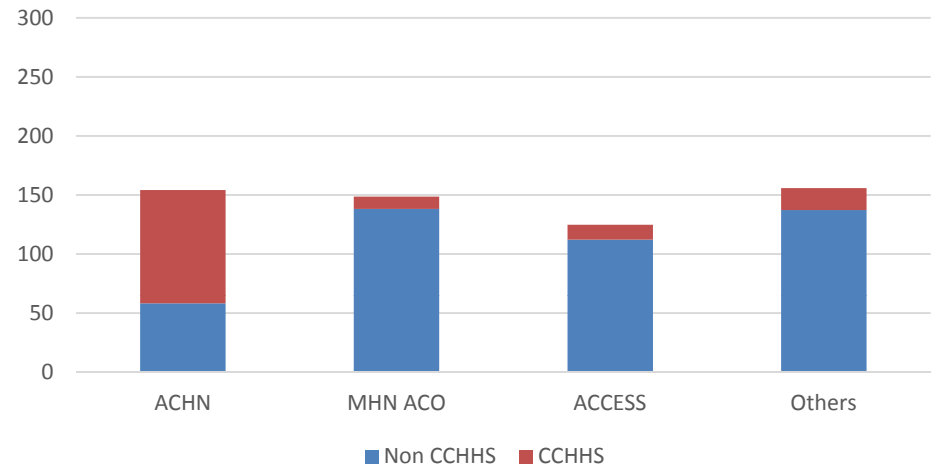
Source: CountyCare

CountyCare: Member Utilization – Comparison (July 14 – Feb 15)

ER Visits per 1000 Member Months



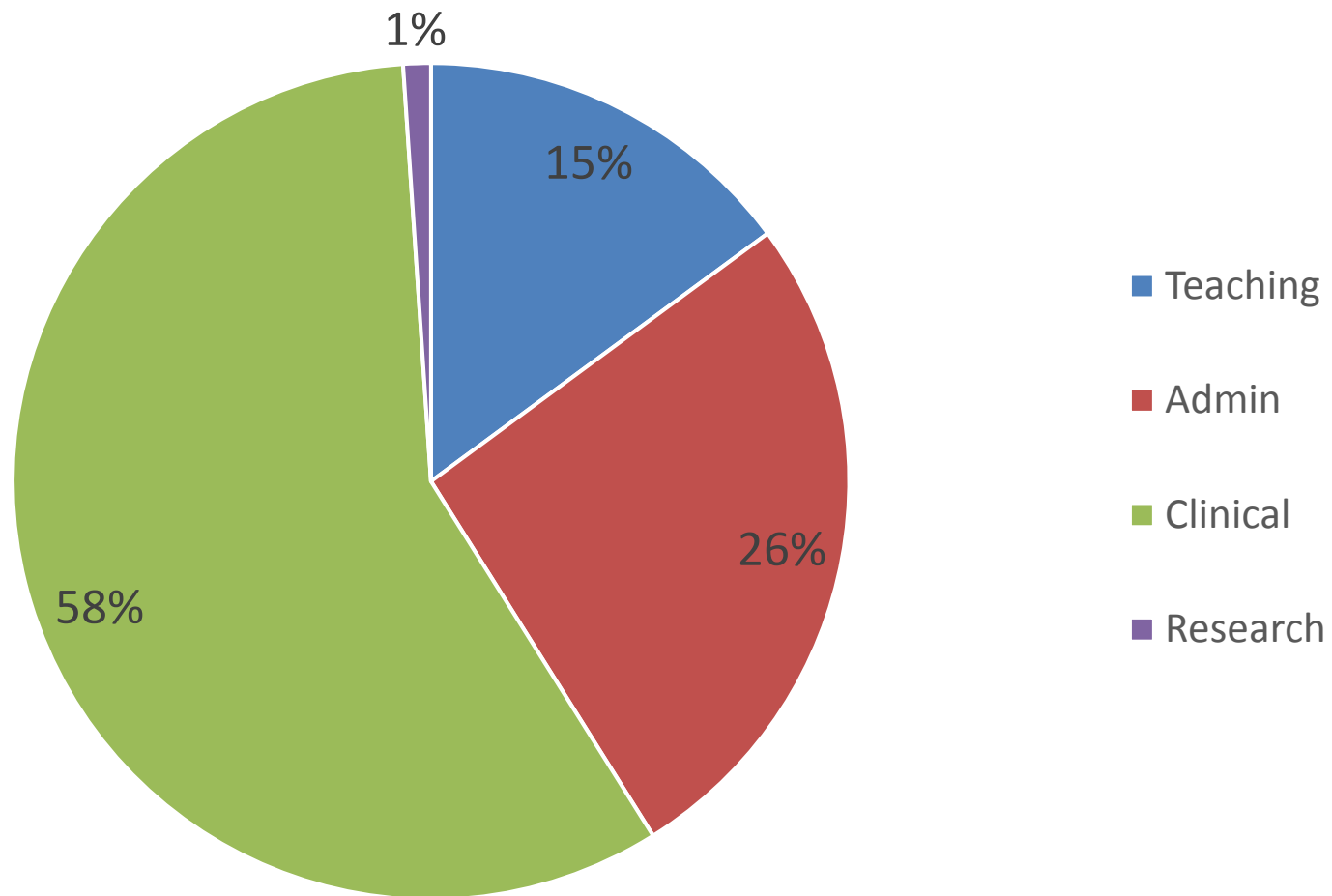
IP Visits per 1000 Member Months



*Others include La Rabida Childrens Hospital

Source: CountyCare

Physician Time Distribution: FY2014



*Stroger physicians only

Source: Self-Reported Time Logs, (1wk/quarter)

CountyCare: MLR

Current Medical Loss Ratio	Affordable Care Act (ACA)
86%	85%

Source: CountyCare

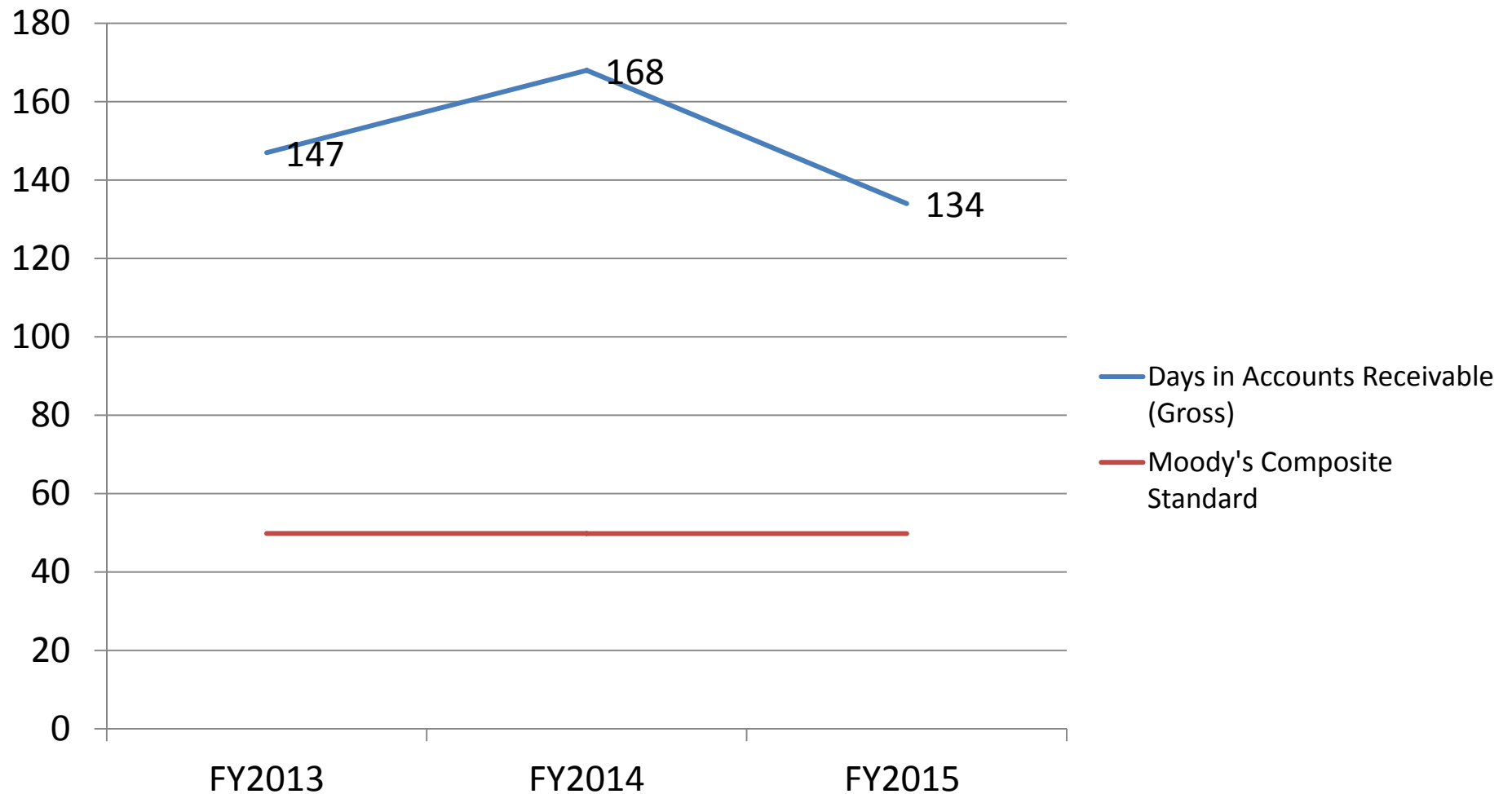
CountyCare Pharmacy

Period	Mbr Mos	CCHHS Mo PMPM	Non-CCHHS Mo PMPM	Mo PMPM
FY2013*	243,654	\$ 14.77	\$ 63.56	\$ 78.33
FY2014	1,081,951	\$ 14.67	\$ 104.51	\$ 119.18
FY2015**	311,903	\$ 9.32	\$ 94.05	\$ 103.37
Overall	1,637,508	\$ 13.66	\$ 96.42	\$ 110.09

*For FY2013 data, the waiver process required application approval before pharmacy benefits were available

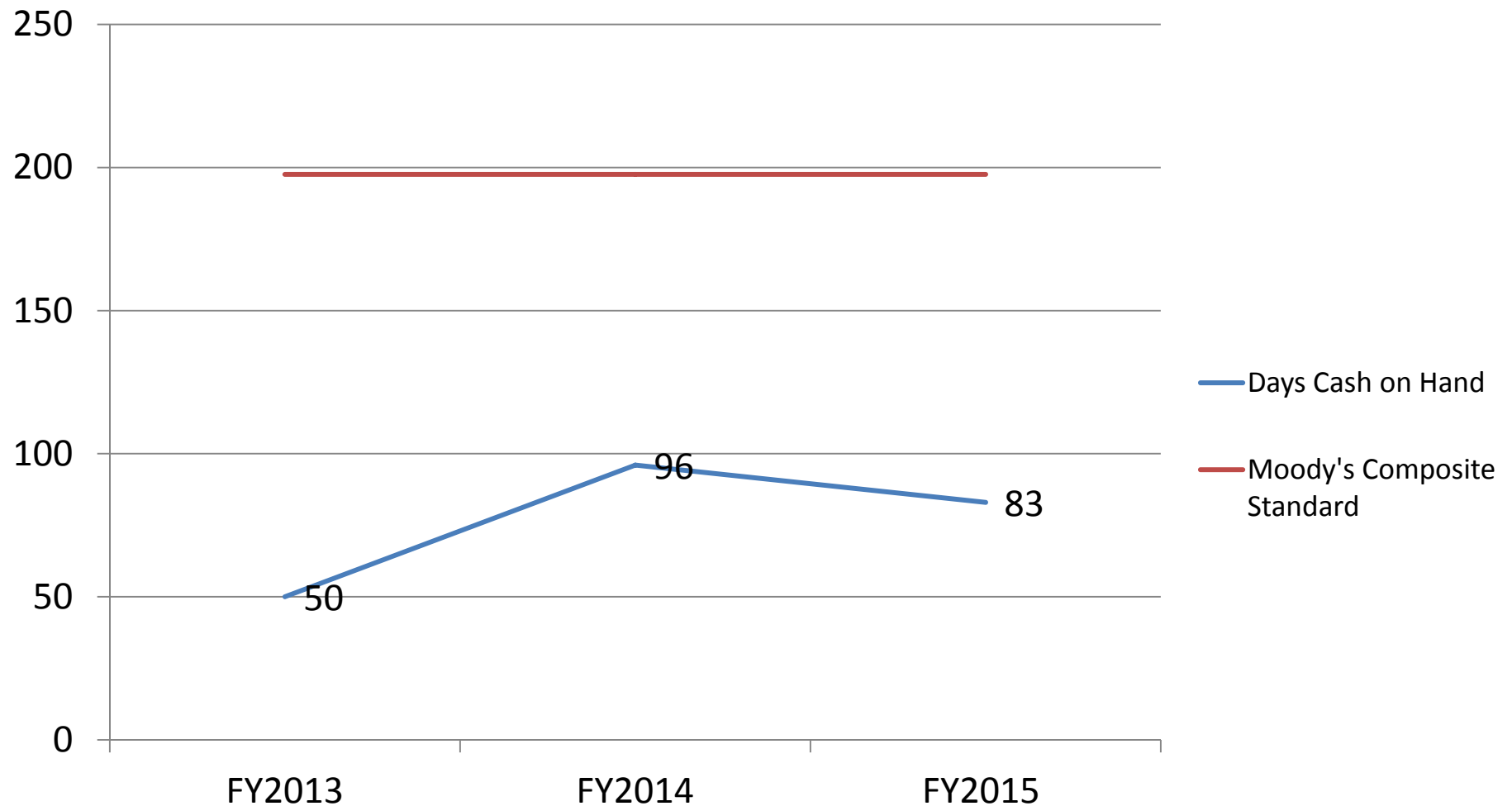
**FY2015 data through 02/2015

CCHHS: Days in Accounts Receivable (Gross)



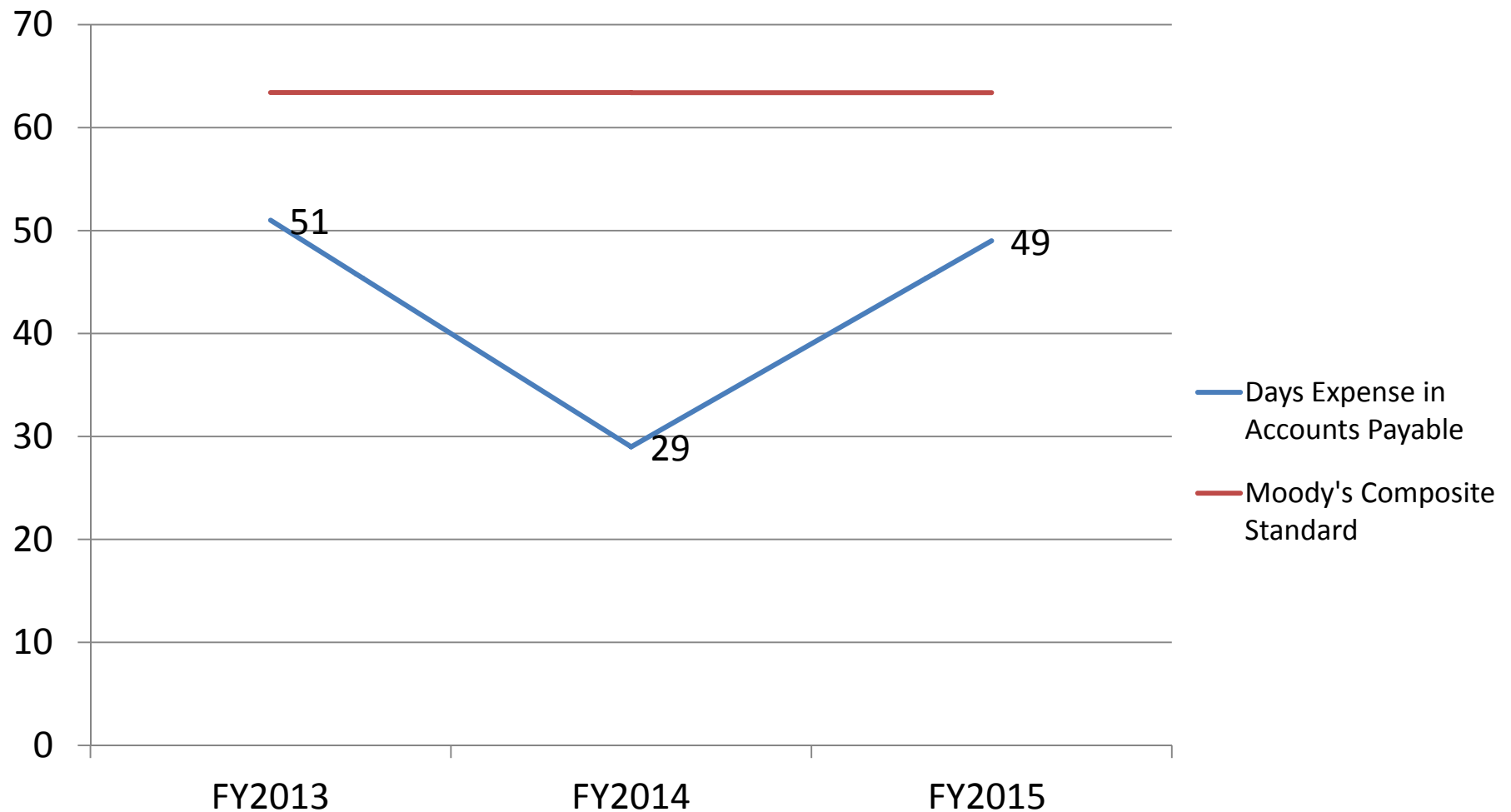
Source:

CCHHS: Days Cash on Hand



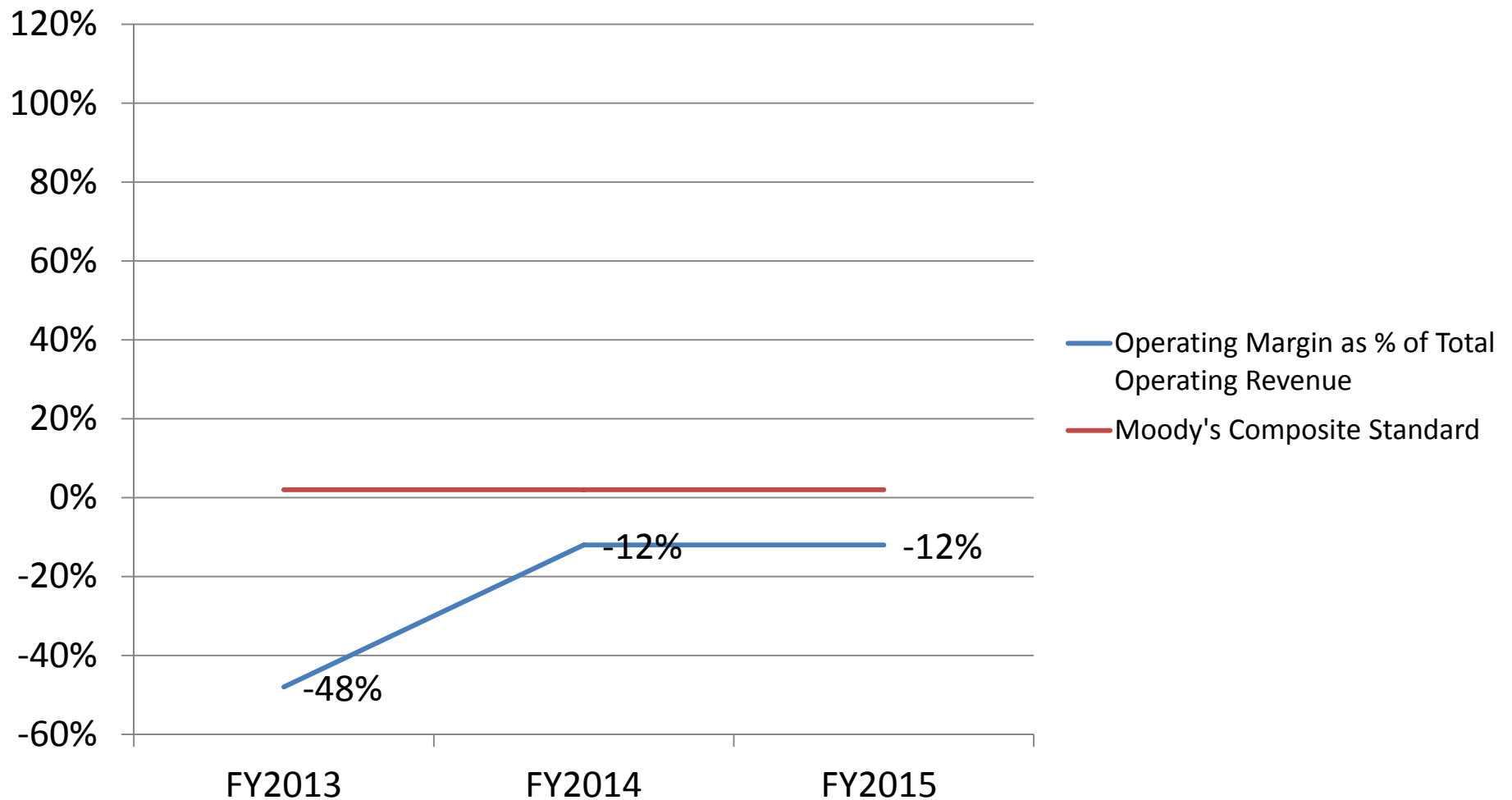
Source: Finance

CCHHS: Days Expense in Accounts Payable



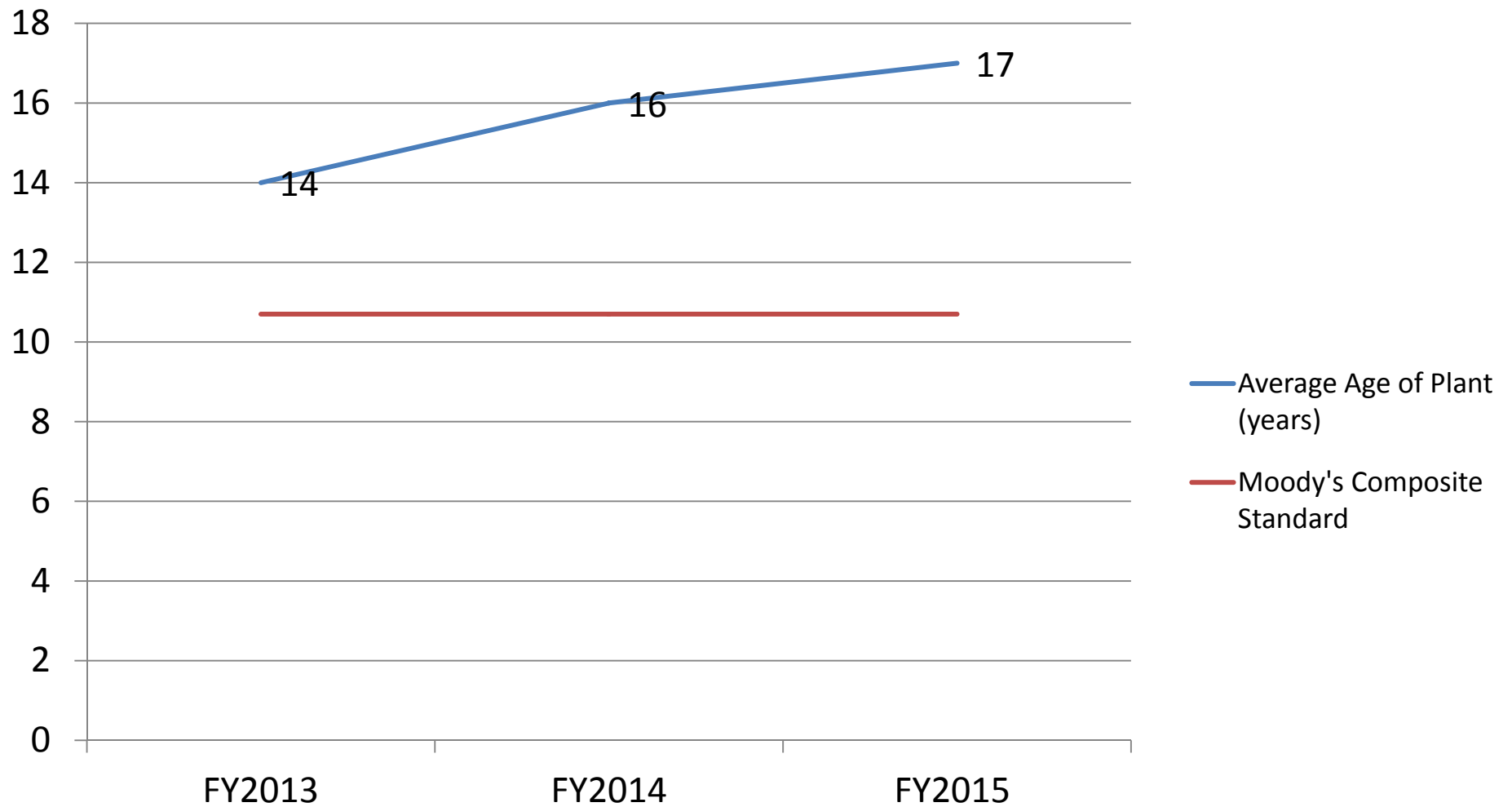
Source: Finance

CCHHS: Operating Margin



Source: Finance

CCHHS: Average Age of Plant



Source: Finance



COOK COUNTY HEALTH
& HOSPITALS SYSTEM
CCHHS

Presentation to the CCHHS Board of Directors

Donna R. Hart, CIO

04/24/2015

Overview of the HIS Dept.

HIS is comprised of six teams:

- Clinical Applications
- Financial Services
- Integration
- Infrastructure
- Telecommunications
- Clinical Engineering

Overview of the HIS Dept.

We support the following organizations:

- John H. Stroger Hospital
- Provident Hospital
- Community Health Centers
- Cook County Dept. of Public Health
- Cermak Health Services serving Cook County Jail
- Juvenile Temporary Detention Center



Overview of the HIS Dept.

HIS supports the following volumes:

- Over 6K Users
- 379 Access Points
- 242 Data Closets
- 10K End User Devices (Thin Clients, Laptops, Tablets, PC's, Printers, Mobile Devices, and WOW's)
- 140 Physical Servers
- 380 VM Servers
- 3K Citrix Sessions for Cerner at Peak
- 250 Citrix Sessions for Other Apps at Peak

Overview of the HIS Dept.

HIS Supports the following volumes:

- 8,490 Email Mailboxes
@cookcountyhhs.org
- Over 100 HIS Supported Apps
- 260 Interfaces Running Daily
- 400K Transactions Daily
- 8K O/P Prescriptions Filled Daily
- 13K I/P Doses Dispensed Daily



Overview of the HIS Dept.

Each team supports the following systems:

Financial

- Siemens- Billing
- Lawson-AP, IC, GL, PO
- Patient Access-
Registration, Scheduling

Clinical

- Electronic Medical
Record (Cerner)
- Bedside Medical Device
Interface

Clinical (Cont.)

- Laboratory, Radiology,
Pharmacy
- Cardiology
- Patient Portal
- Electronic prescribing
- Document scanning
- Quality Reporting

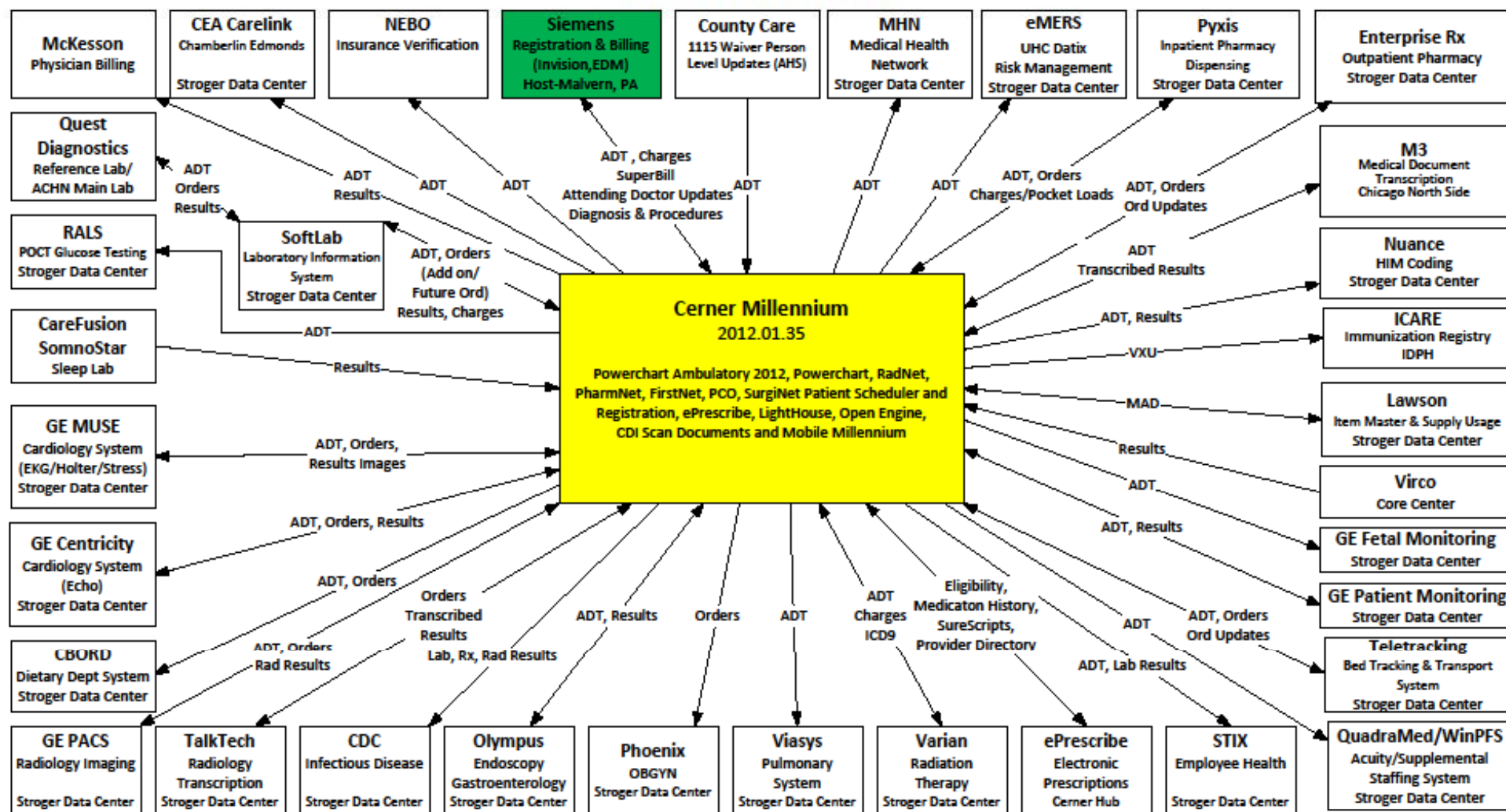


EMR Adoption ModelSM

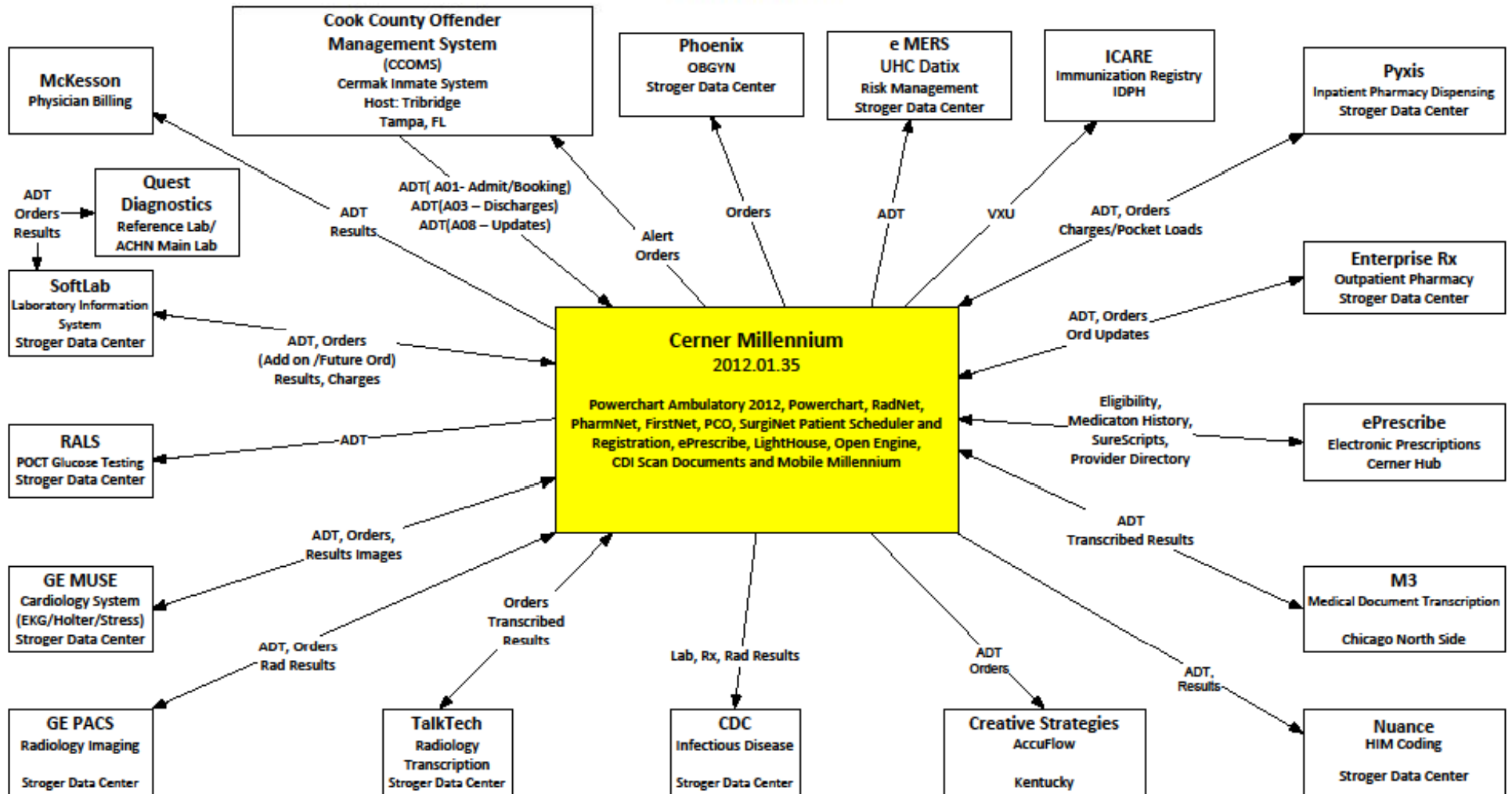
Stage	Cumulative Capabilities
Stage 7	Complete EMR; CCD transactions to share data; Data warehousing; Data continuity with ED, ambulatory, OP
Stage 6	Physician documentation (structured templates), full CDSS (variance & compliance), Closed Loop Medication Administration
Stage 5	Full complement of Radiology PACS
Stage 4	CPOE, Clinical Decision Support (clinical protocols)
Stage 3	Nursing/clinical documentation (flow sheets), CDSS (error checking), PACS available outside Radiology
Stage 2	CDR, Controlled Medical Vocabulary, CDS, may have Document Imaging; HIE capable
Stage 1	Ancillaries – Lab, Rad, Pharmacy - All Installed
Stage 0	All Three Ancillaries Not Installed



Cook County Health & Hospitals System - System Flow Diagram
John H. Stroger, Jr. Hospital



Cook County Health & Hospitals System - System Flow Diagram **Cermak Hospital**



Overview of the HIS Dept.

HIS 2015 441 (Systems Maint.) Budget:

VENDOR CONTRACT	FUNCTION	2015 BUDGET AMNT.
Cerner Corp.	EMR	\$14,030,545
Xerox Corp.	Staffing Augmentation	\$10,397,248
Siemens (Cerner HS)	Financial	\$9,500,000
CDW-G MS Agrmnts.	EA/ECI/Premier Suppt.	\$1,578,000
Soft Computer	Lab	\$1,250,000
Xerox – Lawson	ERP	\$850,000
McKesson Pharm.	Pharmacy	\$620,000
All Other Contracts	Various	\$4,519,374
	Total All HIS Contracts	\$42,745,167



Priority Initiatives 2015-2016

Financial

- ICD 10
- Lawson Materials, Supply Chain Optimization, ERP Integration
- ABN
- Professional Billing In house
- EMPI-Master Patient Index
- Document Quality Review-automation
- Clairvia- Scheduling and Patient Acuity
- eSignature



Priority Initiatives 2015-2016

Regulatory and Quality

- Meaningful Use
- Physician Quality Reporting System
- Electronic Prescribing of Controlled Substances
- Primary Care Medical Home Certification
- HIMSS Stage 7



Priority Initiatives 2015-2016

Patient Care Improvements

- Patient Plans of Care
- Fetal Link upgrade
- Patient Portal
- Self Registration Kiosks
- Juvenile Temporary Detention Center
- Cerner Code Upgrade
- Population Health
- Case Management



Priority Initiatives 2015-2016

Provider Experience

- Single Sign On
- Dragon
- Provider Portal

Priority Initiatives 2015-2016

Technology

- Remote Hosting
- Hardware Upgrades
- Application Tier Migration
- Server Upgrades
- Network Upgrades

Interoperability

- Health Information Exchange
- Image Viewer
- CAMM Image Storage
- Laboratory and Cardiology Systems

